



CHILDREN OF INCARCERATED PARENTS (CIP) PARTNERSHIP EVALUATION

April 14, 2023



THE PARTNERSHIP EFFECTIVENESS CONTINUUM (PEC) (KING 2014)

Based in research

Highlights specific areas where the partnership program excels

Highlights specific areas to target for partnership program improvements

Requires respondents to score survey items based on evidence of defined criteria used to determine partnership effectiveness

SIX DIMENSIONS OF EFFECTIVE PARTNERSHIPS

Partnership
Vision

Institutional
Leadership

Communication
and
Collaboration

Joint Ownership
and
Accountability
for Results

System
Alignment,
Integration, and
Sustainability

Response to
Local Context

INDICATORS AND CRITERIA

PEC Organization:

- Dimensions
 - Indicators
 - Criteria



EXAMPLE

Communication and Collaboration

Indicator	Criteria	Rating System
Communication Tools and Protocols	<ul style="list-style-type: none">Processes for documenting and disseminating partnership meeting minutes and following up on partner action steps are in placeAn agreed upon schedule of meeting dates, times, and locations is established at the beginning of the year to support regular attendance	ALL Criteria are met = highly effective MOST criteria are met = effective SOME criteria are met = partially effective FEW criteria are met = ineffective

ABOUT THE EVALUATION PROCESS

- Respondents were part of an extensive discussion on how to score the PEC.
 - The PEC was distributed as an online survey following the PEC discussion.
 - 22 CIP members completed the PEC.
 - E-TEAM analyzed and reported the PEC results.
 - PEC results were shared during the CIP December meeting.
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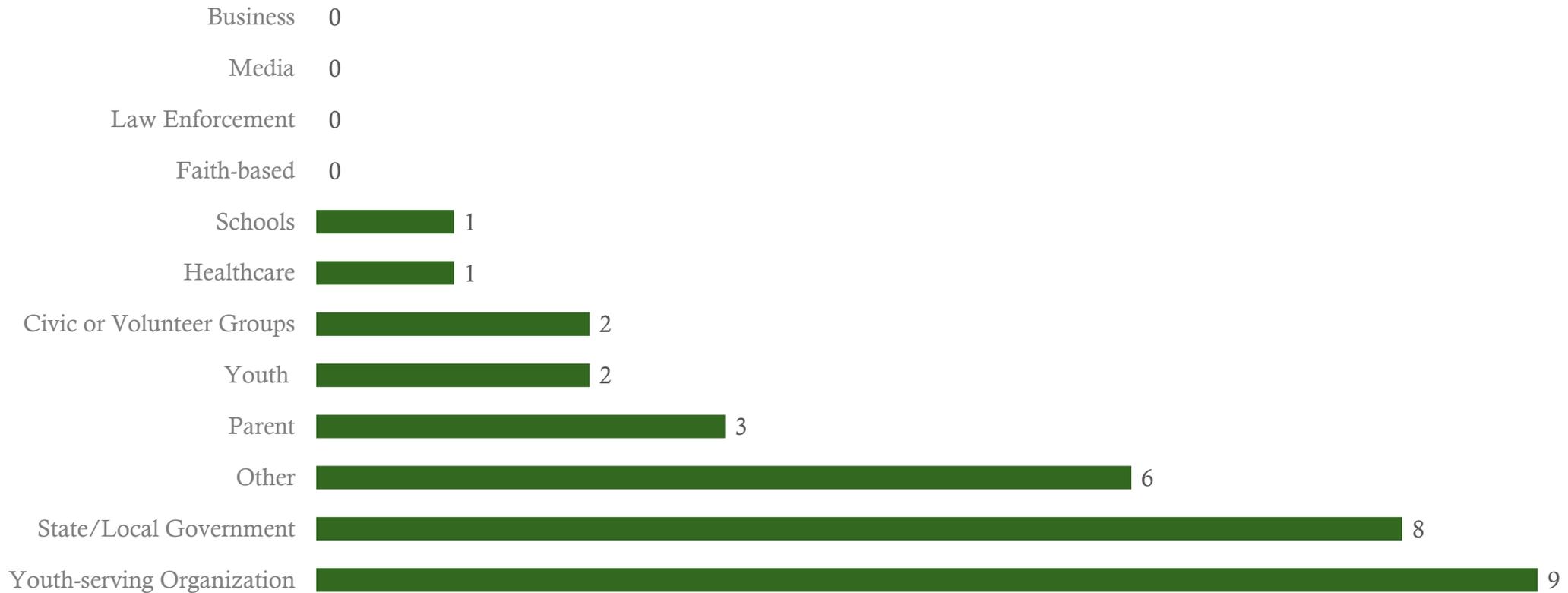
OIP ADVISORY COMMITTEE ATTENDANCE



Survey Respondents' Average Attendance Over the Last 12 Months

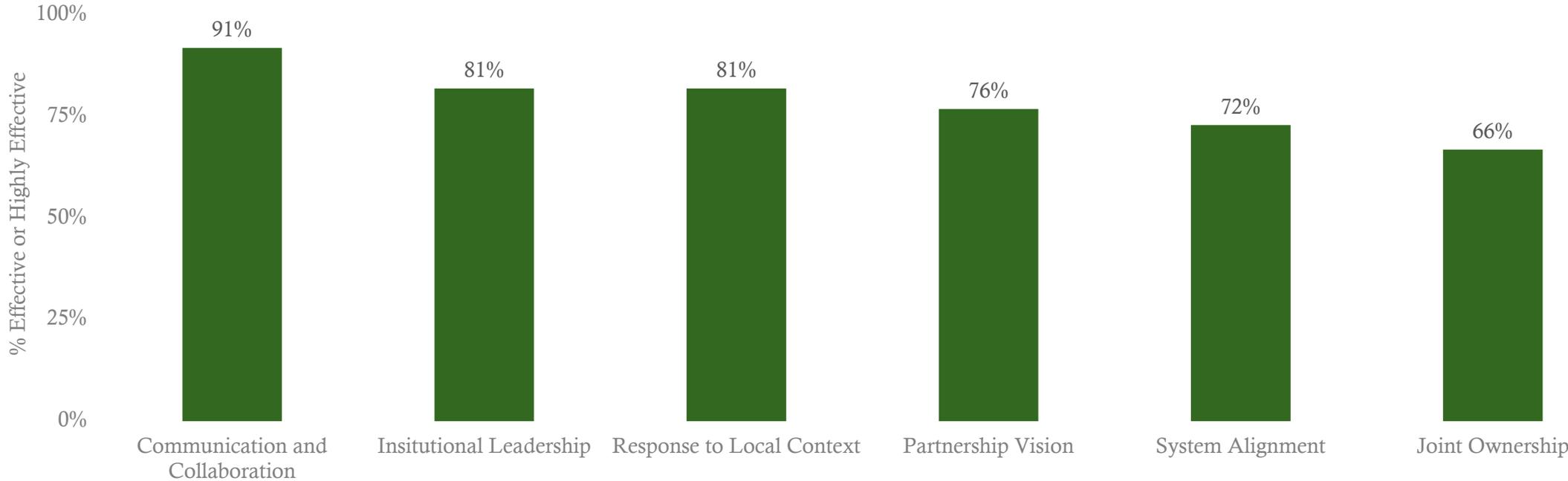
- Average reported attendance =6
- Most number of meetings attended=12
- Least number of meetings attended =2

COMMUNITY SECTOR REPRESENTATION



THE OIP IS AN EFFECTIVE PARTNERSHIP WITH ROOM FOR GROWTH

PEC Dimensions



%represents number of effective or highly effective responses

COMMUNICATION AND COLLABORATION



91%

Effective or Highly
Effective

- 100% Communication Tools and Protocols
- 95% Information Dissemination
- 85% Partnership and Advocacy
- 85% Collaborative Relationships
- 85% Decision Making

INSTITUTIONAL LEADERSHIP



81%

Effective or Highly
Effective

- 91% Leader Engagement
- 86% Shared Leadership
- 85% Resource Commitment
- 67% Partnership Incentives

RESPONSE TO LOCAL CONTEXT



Effective or Highly
Effective

- 95% Community
- 85% Partner Recruitment and Selection
- 65% Policy Environment

PARTNERSHIP VISION



Effective or Highly
Effective

- 91% Mission and Beliefs
- 82% Shared Goals
- 78% Joint Reform Agenda
- 66% Measures for and Assessing Progress
- 64% Strategic Action Plan

SYSTEM ALIGNMENT, INTEGRATION, AND SUSTAINABILITY



Effective or Highly
Effective

- 86% Integration
- 75% Alignment
- 55% Sustainability

JOINT OWNERSHIP AND ACCOUNTABILITY FOR RESULTS



Effective or Highly
Effective

- 90% Sharing Progress
- 75% Boundary-spanning Roles and Structures
- 65% Roles and Responsibilities
- 60% Performance-Based Assessment
- 50% Benchmarks and Outcomes
- 55% Using Data

THE CIP PARTNERSHIP CAN BE EVEN MORE EFFECTIVE

“Shared goals for the year [including] action steps for engaging legislative members to increase advocacy and promote the issues of biggest importance to CIP work.”

-CIP member response to:
What would make the CIP
partnership more effective?

At least one ineffective rating

- Strategic Action Plan
 - Measures for and Assessing Progress
 - Partnership Incentives
 - Decision Making
 - Roles and Responsibilities
 - Boundary Spanning Roles and Structures
 - Benchmarks and Outcomes
 - Using Data
 - Sustainability
 - Policy Environment
-

THE CIP PARTNERSHIP EXCELS IN MANY AREAS

“Commitment of partners to improving the lives of children of incarcerated parents; Information sharing and networking among partners; Teamwork and sincere collaboration among partners.”

-CIP member response to:
What are the best aspects of the
CIP partnership?

90% or Above

- Communication and Collaboration
- Information Dissemination
- Leader Engagement
- Community
- Mission and Beliefs

RECOMMENDATIONS

“Even though our partnership is a bit more informal in its structure, and for the overall culture of the group, that works, but I do believe certain processes need a bit more formalization, such as this evaluation, which is a step in the right direction.”

- Continue disseminating information, being inclusive, communicating, and collaborating
 - Develop a strategic plan collaboratively with CIP members
 - Continue collecting data and presenting any evaluation results at CIP partnership meetings
-

REFERENCES

King, C. L. (2014). Quality Measures Partnership Effectiveness Continuum, Waltham, MA: Education Development Center, Inc.

THE UNIVERSITY OF OKLAHOMA E-TEAM

**We help
organizations
make sense
of data &
connect the
dots.**

E-TEAM, at the University of Oklahoma, designs research and evaluations to help organizations understand and use information and data to solve real-world problems with progress and outcomes monitoring, technology solutions, study findings, and recommendations.

All E-TEAM research and evaluations are designed to comply with nationally mandated standards for conducting research involving human participants. E-TEAM recognizes that demographic, sociopolitical, and contextual perspectives matter fundamentally in evaluation. E-TEAM also recognizes that privilege and intersectionality impact data collection and analysis and interpretation.

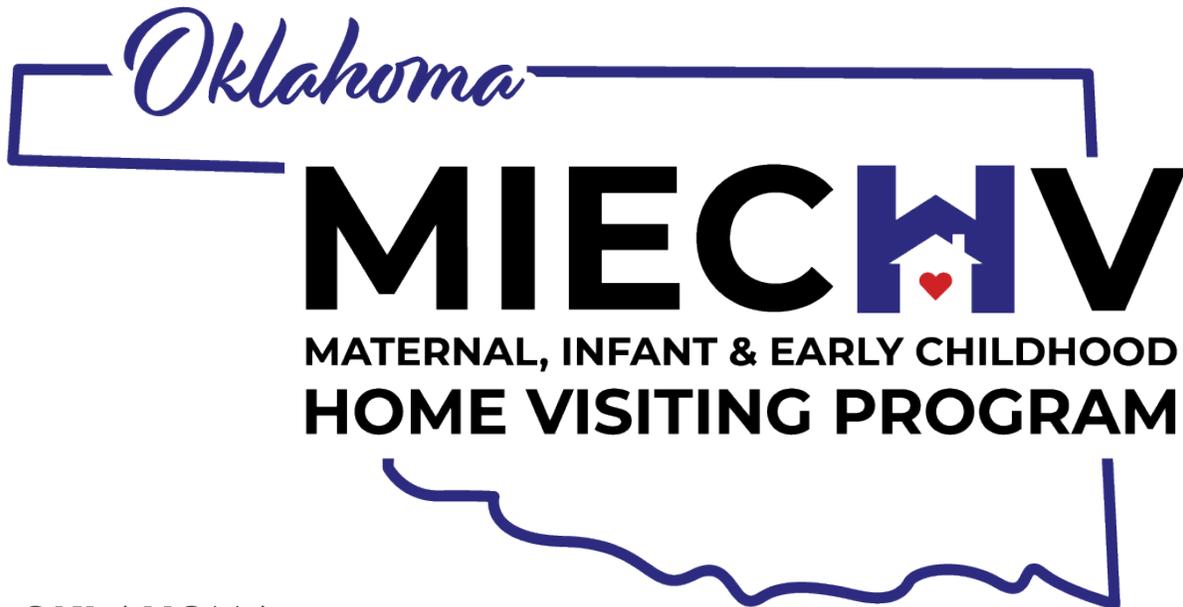
We align our evaluations from planning, implementation, data collection, analysis, interpretation, and reporting with an understanding of these issues. In service to this, we recruit and hire staff from across diverse racial and ethnic groups, cultures, and perspectives.



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10/19/2021

Oklahoma Maternal, Infant, and Early Childhood Home Visiting (MIECHV)



OKLAHOMA
State Department of Health



MIECHV Grant

- Funding from the U.S. Department of Health and Human Services, Health Resources and Services Administration (HRSA)
- Authorized by the Patient Protection and Affordable Care Act of 2010
- Designed to
 - Strengthen & improve programs and activities carried out under Title V – Maternal & Child Health
 - Improve coordination of services for at-risk communities
 - Identify & provide comprehensive services to improve outcomes for families who reside in at-risk communities



Home Visiting Services

- Home visiting programs match parents with trained professionals who provide information and support starting at pregnancy and continuing throughout a child's first five years.
- Home visiting programs vary in goals and content of services but in general, they combine parenting and health care education, child abuse prevention, and early intervention.



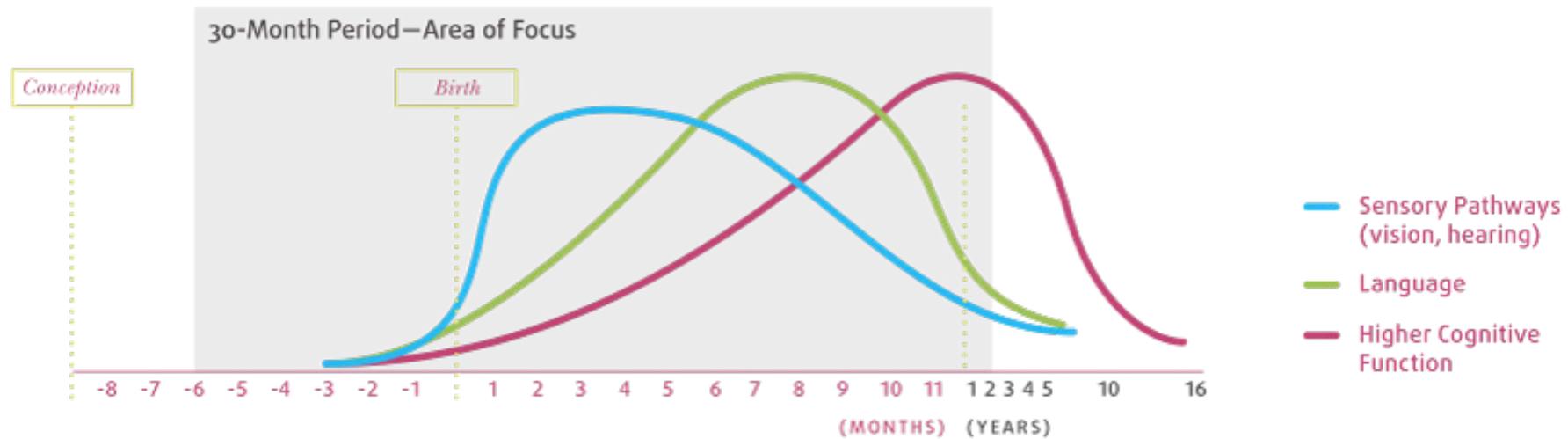
THE FIRST 1,000 DAYS

- Early experiences influence the developing brain
- Toxic affects of chronic stress
- Adversity can lead to lifelong problems
- Early intervention can prevent consequences
- Stable, caring relationships essential for development



BRAIN DEVELOPMENT

Synapse formation dependent on early experiences



Source: Nelson, C.A., *From Neurons to Neighborhoods* (2000).
Shonkoff, J. & Phillips, D. (Eds.)



Evidence-Based Home Visiting Models

- Oklahoma MIECHV Funded Models
 - Nurse Family Partnership (Children First)
 - Parents as Teachers
 - SafeCare



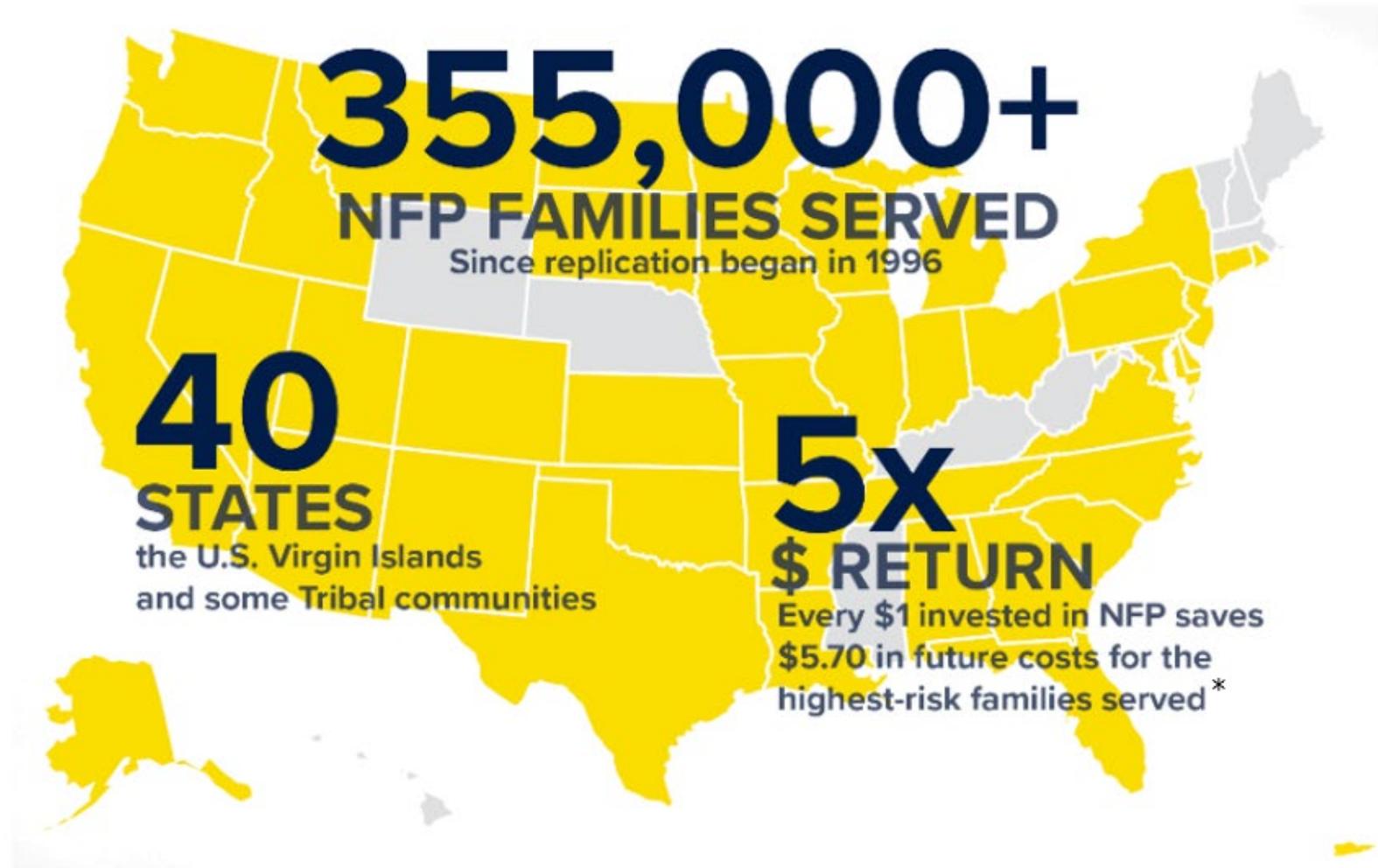


Children First: Oklahoma's Nurse-Family Partnership



Children First
Oklahoma's Nurse-Family Partnership





*Karoly, L., Kilburn, M. R., Cannon, J. Proven results, future promise. RAND Corporation 2005.





KEY GOALS

- Improve Pregnancy Outcomes
- Improve Child Health and Development
- Improve Economic Self-Sufficiency of the Family





ELIGIBILITY CRITERIA

- 1st time mother
- Less than 29 weeks pregnant
- Low income (185% of poverty)
- Voluntary participation
- Exceptions can include women:
 - under 18 no matter parents' income
 - past 29 weeks with high-risk factors
 - with a history of abortion, miscarriage, stillbirth or adoption if they have never parented a child



WHO WE SERVE

Median Age

21 years

28% under 20

Single

81% never married

Race/Ethnicity

White (66%)

Black or African American (15%)

American Indian or Alaska Native (7%)

Asian or Pacific Islander (3%)

Other (8%)

Hispanic (22%)

Household Income

67% ≤ \$20K

Education

71% have a HS diploma or GED



WHAT WE DO

Targeted Health Assessments
Child Development Screens (Ages & Stages)
DANCE (Dyadic Assessment of Naturalistic Care-giver/Child Interaction)
Home Safety Assessments
Intimate Partner Violence Screening
Depression Screening (PHQ-9)
General Anxiety Screening (GAD-7)
Health Education
Parenting Education
Life Course Development
Referrals/Linkages



HOW WE DO IT

- Established visit schedule with flexibility
 - Visit-to-visit guidelines and facilitators that reflect a strengths-based approach:
 - the client is the expert on her own life
 - what is the client's heart's desire?
 - Continuous assessment of client's risks and strengths to plan nursing care/interventions
- interviewing (MI), reflective practice and recognition of the stages of change to guide clients in reaching immediate and future life goals
- Development of a trusting, respectful therapeutic relationship between nurse and client



RESULTS

- **88%** Babies Born Full Term
- **91%** Mothers Initiated Breastfeeding
- **84%** Babies Were Up to Date on Wellness Exams
- **90%** Babies Received all Immunizations by 24 Months
- **50%** of Clients Increased Household Income by the Time Baby was One Year Old





OUR MISSION:

Parents as Teachers promotes the optimal early development, learning and health of children by supporting and engaging their parents and caregivers.

OUR APPROACH:

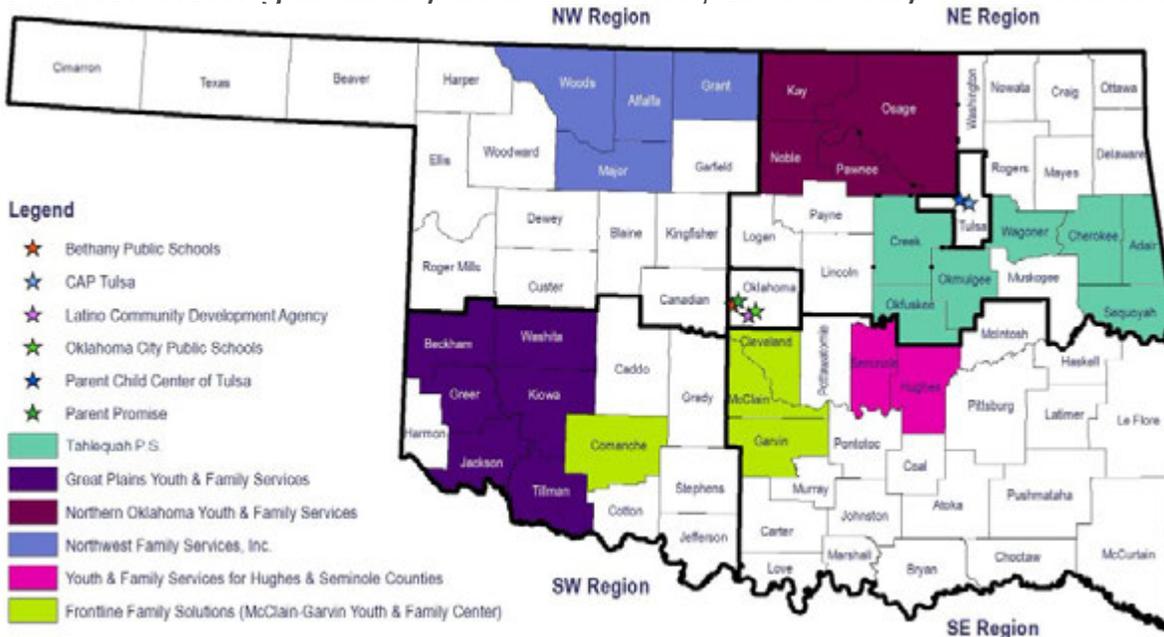
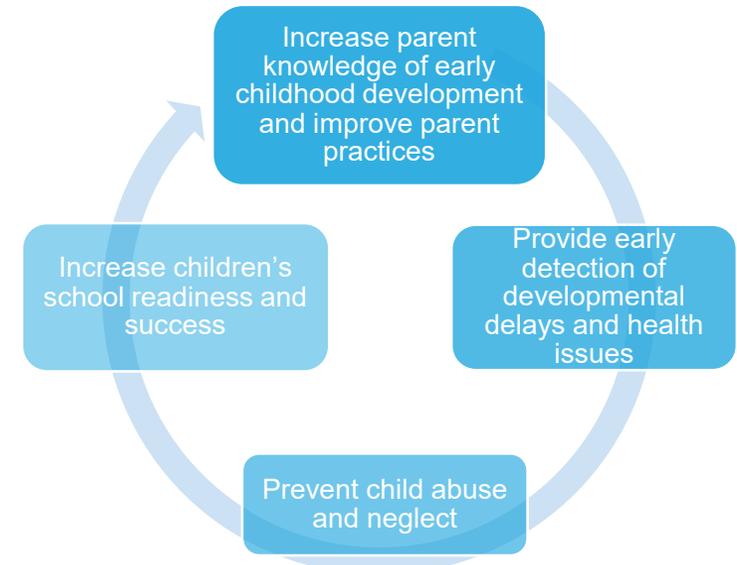
The Parents as Teachers approach is to **partner, facilitate and reflect**. We do this at every level of our organization, from a parent educator visiting a family in their home, all the way to the work of the

Our Model Components:



Parents as Teachers builds strong communities, thriving families and children who are healthy, safe and ready to learn by matching parents and caregivers with trained professionals who make regular personal home visits. Families can be served from prenatal through the child's kindergarten completion.

Four Primary Goals of Parents as Teachers



SafeCare

- Purpose: To ensure all children have a nurturing, safe, and healthy home environment
- Service Delivery:
 - Recommended delivery is 18, 60 minute sessions occurring weekly; however, length of service can vary dependent on several variables
 - Focus on three (3) core modules –
 - Parent Child/Parent Infant Interactions
 - Home Safety
 - Infant/Child Health



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 - Infant/Child Health
- Outcomes: SafeCare has been shown to positively impact important child welfare outcomes
 - Recidivism (child maltreatment re-reports)
 - Out-of-home placements



Services in At-Risk Counties

- Oklahoma MIECHV – 919 Families served in 2021
 - Oklahoma
 - Tulsa
 - Comanche



Benchmark Categories

Quantifiable, measurable improvements for the populations participating in the program

- 1) Maternal and Newborn health
- 2) Child injuries, abuse, neglect, or maltreatment, and reduction of emergency department visits;
- 3) School Readiness and Achievement
- 4) Crime or Domestic Violence;
- 5) Family Economic Self-Sufficiency; and
- 6) Coordination and referrals for other community resources and support.



Unique Aspects of Oklahoma MIECHV

Intake Triage

- Statewide outreach campaign used for centralized intake that is funded by the MIECHV Grant
- Goal is to reduce guesswork for families in enrolling in home visiting services and to increase referrals
- Commercials in different media avenues including Pandora and Instagram



Free Parenting Support and Resources | parentPRO | ...

465K views · 1 year ago



Novella | Free Parenting Support | parentPRO

35K views · 1 month ago



Sarah | Free Parenting Support | parentPRO

14K views · 1 month ago

Community Connectors

- Currently there are three Community Connectors
- Enroll families in home visiting programs
- Participate in community events for recruitment

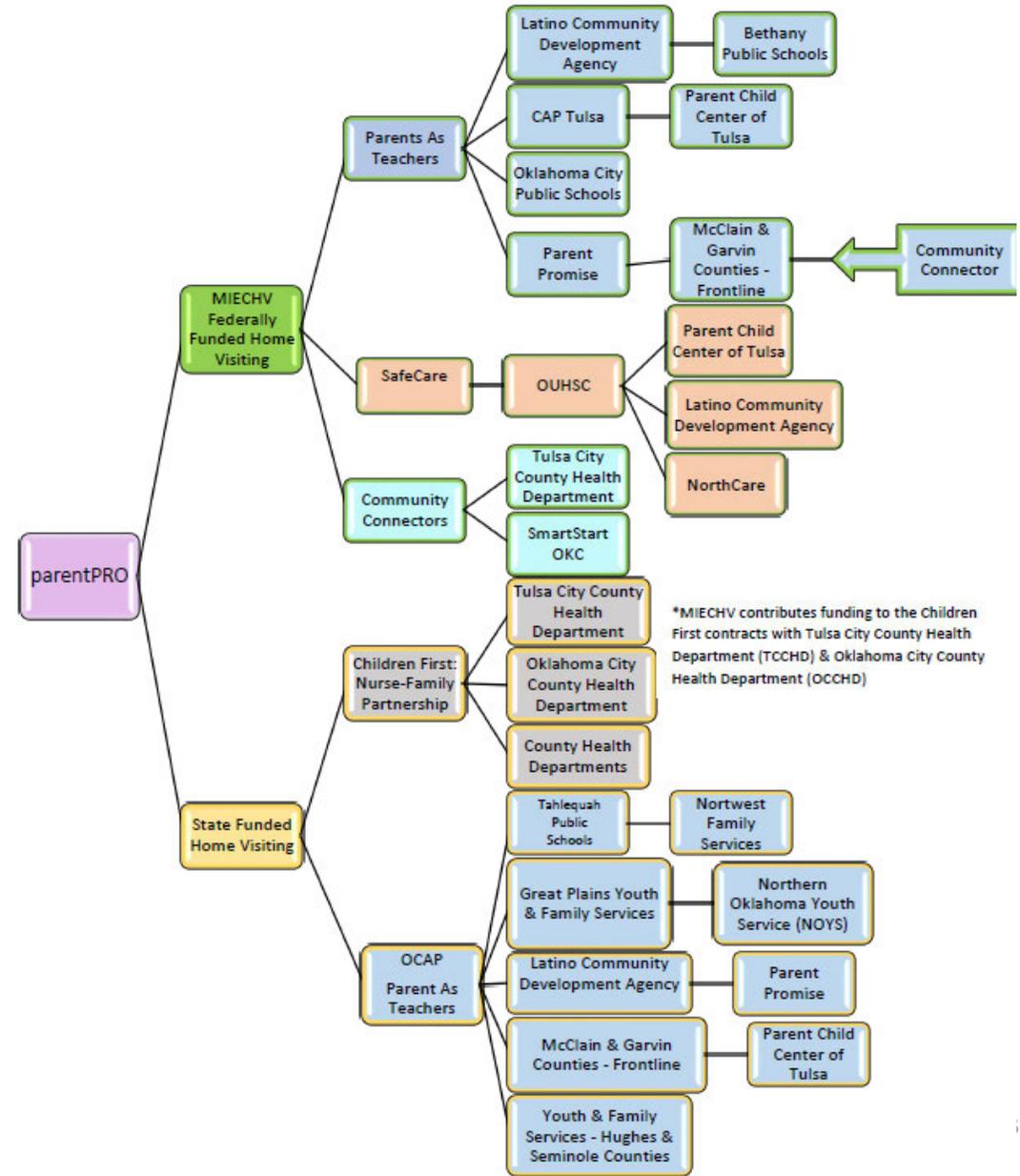


Local Implementing Agencies (LIAs)



MIECHV Currently Funds

- 7 - PAT Contracts
- 3 - SafeCare Contracts
- 2 - Children First (NFP) Contracts



Other Components

- Rigorous evaluation done by external researchers at OUHSC
- Continuous quality improvement aimed at increasing the effectiveness and efficiency of programs
- Learning Collaborative with the goal of helping to improve programs in benchmark areas
- Centralized Database for all Home Visiting Programs funded by OSDH



MIECHV Updates

UPDATES

ARPA Supplemental Award

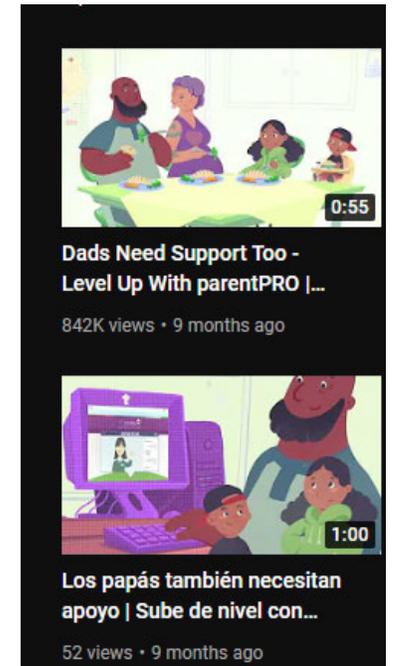
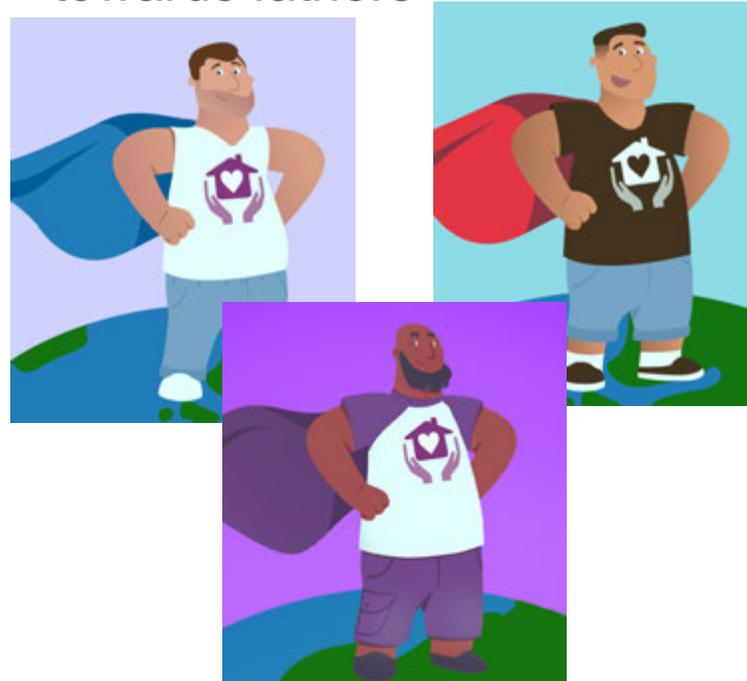
- Hotspots for families that wish to continue virtual visits
- Provided parentPRO logo facemasks for adults and children and hand sanitizer
- New Trainings for home visitors
- Diaper Bank Coordination
- Family Connects expansion in Tulsa
- Expansion of Reflective Supervision

Innovation Grant Award

- Proposal to introduce technology-driven innovations aiming to streamline and amplify the methods of care coordination among home visiting programs

Formula Grants

- Needs Assessment Update
- New Evaluation in Coordinated effort with other MIECHV funded States
- New parentPRO commercial marketed towards fathers



UPDATES

Walorski MIECHV Program Funding Allocation Reauthorization approved.

- Doubling of funds over the next five years
- Requires a 3 to 1 match

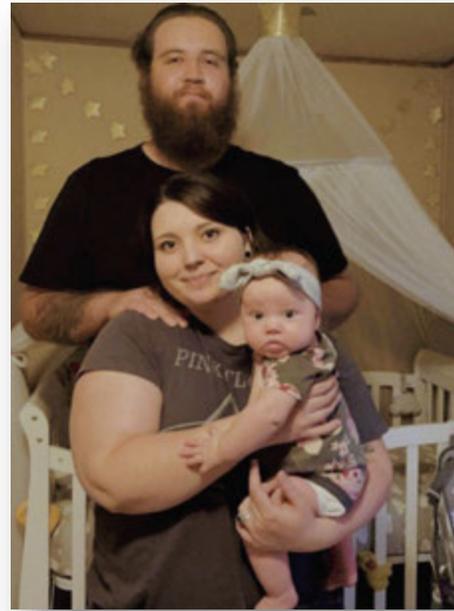
Table 3. Estimates of Non-Federal Match Spending Required for Entities to Receive Their Maximum Initial MIECHV Federal Matching Grant under a Proposed Reauthorization (FY2023-FY2027), by Entity

Entity	FY2023	FY2024	FY2025	FY2026	FY2027
Oklahoma	0	258.898	496.780	745.170	1.452.266

Entity	FY2021	FY2023			FY2024			FY2025			FY2026			FY2027		
		Base	Match	Total												
North Dakota	0.978	1.376	0.0	1.376	1.376	0.776	2.152	1.376	1.067	2.443	1.376	1.600	2.976	1.376	2.322	3.698
Ohio	7.711	10.854	0.0	10.854	10.854	0.778	11.631	10.854	2.212	13.066	10.854	3.318	14.172	10.854	7.827	18.680
Oklahoma	6.636	7.642	0.0	7.642	7.642	0.777	8.419	7.642	1.490	9.132	7.642	2.236	9.877	7.642	4.357	11.999
Oregon	8.243	9.492	0.0	9.492	9.492	0.776	10.269	9.492	1.272	10.764	9.492	1.907	11.400	9.492	3.305	12.798
Pennsylvania	11.805	16.615	0.0	16.615	16.615	0.777	17.393	16.615	1.969	18.584	16.615	2.954	19.569	16.615	6.658	23.273
Rhode Island	7.349	8.463	0.0	8.463	8.463	0.776	9.239	8.463	1.080	9.543	8.463	1.620	10.083	8.463	2.384	10.847



Family Quotes:



“This family has taught me that circumstance does not always indicate continuity; it is possible for our parents who are created in the emerging years to heal from the generational trauma we may have collected from those around us. Charlie, Lilith and Colton embody a blooming example of that ability.” – Morgan Burchett, Parent Educator serving Wagoner County

“To address Parker’s picky eating issues, my Parent Educator, Sharla made a referral to the Comanche County Health Department with a Nutrition Specialist. I was able to get the information I needed to help Parker and was happy to report to Sharla he started eating a healthy variety of foods. Parker even started eating tuna fish sandwiches, he would have never done that before!” – Victoria, enrolled in Comanche County.



“I really like the support of this program because I feel like I have a lot to learn about being a father”- Dale



Questions?